## U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Small PHA Plan Update Annual Plan for Fiscal Year: 2003

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

HUD 50075 OMB Approval No: 2577-0226 Expires: 03/31/2002

## PHA Plan Agency Identification

PHA Name: Bath Housing Authority
PHA Number: ME-019
PHA Fiscal Year Beginning: 01/2003
PHA Plan Contact Information:  Name: Joanne Troy Phone: 207 443-3116  TDD: 207 443-8114  Email (if available): jtroy@gwi.net
Public Access to Information Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)  Main administrative office of the PHA PHA development management offices
Display Locations For PHA Plans and Supporting Documents
The PHA Plans (including attachments) are available for public inspection at: (select all that apply)  Main administrative office of the PHA PHA development management offices Main administrative office of the local, county or State government Public library PHA website Other (list below)
PHA Plan Supporting Documents are available for inspection at: (select all that apply)  Main business office of the PHA  PHA development management offices  Other (list below)
PHA Programs Administered:

## Annual PHA Plan Fiscal Year 2003

[24 CFR Part 903.7]

### i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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Attachment D: Resident Membership on PHA Board or Governing Body	
Attachment E: Membership of Resident Advisory Board or Boards	
Attachment F: Comments of Resident Advisory Board or Boards &	
Explanation of PHA Response (must be attached if not included in PHA	
Plan text)	
Other (List below, providing each attachment name)	
Attachment G: Statement of Efforts to Achieve Goals	

### ii. Executive Summary

n: Executive Summary	
[24 CFR Part 903.7 9 (r)]	
At PHA option, provide a brief overview of the information in the Annual Plan	

### 1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

Bath Housing Authority has passed a new ethics and conflict of interest policy during the September, 2002 Board Meeting. Bath will be reviewing their admission and occupancy policy and Section 8 administrative policies to determine that it is consistent with current regulations.

2. Capital Improvement Needs [24 CFR Part 903.7 9 (g)]
Exemptions: Section 8 only PHAs are not required to complete this component.
A.  Yes  No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?
B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 148,877
C. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.
D. Capital Fund Program Grant Submissions
(1) Capital Fund Program 5-Year Action Plan
The Capital Fund Program 5-Year Action Plan is provided as Attachment B
(2) Capital Fund Program Annual Statement
The Capital Fund Program Annual Statement is provided as Attachment C
3. Demolition and Disposition [24 CFR Part 903.7 9 (h)]
Applicability: Section 8 only PHAs are not required to complete this section.
1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.)

## 2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)					
1a. Development name:					
1b. Development (project) number:					
2. Activity type: Demolition					
Disposition					
3. Application status (select one)					
Approved					
Submitted, pending approval					
Planned application					
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)					
5. Number of units affected:					
6. Coverage of action (select one)					
Part of the development					
Total development  7. Relocation resources (select all that apply)					
Section 8 for units					
Public housing for units					
Preference for admission to other public housing or section 8					
Other housing for units (describe below)					
8. Timeline for activity:					
a. Actual or projected start date of activity:					
b. Actual or projected start date of relocation activities:					
c. Projected end date of activity:					
4. Voucher Homeownership Program [24 CFR Part 903.7 9 (k)]					
A. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.)					
B. Capacity of the PHA to Administer a Section 8 Homeownership Program  The PHA has demonstrated its capacity to administer the program by (select all that apply):  Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources					

<ul> <li>☑ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards</li> <li>☑ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):</li> </ul>
Executive Director has over ten years of experience in the building of affordable homeownership housing prior to joining the Bath Housing Authority. Experience includes construction, marketing, homeowner training, credit counseling and financing.
The Board of Commissioners and the Executive Director are minority Directors in a non-profit development corporation that has an active affordable home ownership program. The Bath Housing Development Corporation, renovates and sells single family homes to first-time homebuyers in Bath.
Executive Director is a member of the City of Bath, Community Development Block Grant Committee. The CDBG Committee has an active Home Improvement Loan Fund that is has administered for four years. The Home Improvement Loan Fund provides assistance to both qualified multi-family projects and single family homes.
5. Safety and Crime Prevention: PHDEP Plan [24 CFR Part 903.7 (m)]
Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.
A.  Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$
C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
D.

# **6. Other Information** [24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response				
1. X Yes 🗌	No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?			
2. If yes, the o	comments are Attached at Attachment F			
3. In what ma	Inner did the PHA address those comments? (select all that apply)  The PHA changed portions of the PHA Plan in response to comments  A list of these changes is included  Yes No: below or			
	Yes No: at the end of the RAB Comments in Attachment Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment F.			
	Other: (list below)			
B. Statement	of Consistency with the Consolidated Plan			
	ble Consolidated Plan, make the following statement (copy questions as many times as necessary).			
1. Consolidat	ed Plan jurisdiction: State of Maine			
	has taken the following steps to ensure consistency of this PHA Plan with the ed Plan for the jurisdiction: (select all that apply)			
$\boxtimes$	The PHA has based its statement of needs of families in the jurisdiction on the			
	needs expressed in the Consolidated Plan/s.  The PHA has participated in any consultation process organized and offered by			
	the Consolidated Plan agency in the development of the Consolidated Plan.  The PHA has consulted with the Consolidated Plan agency during the			
	development of this PHA Plan.  Activities to be undertaken by the PHA in the coming year are consistent with			
	specific initiatives contained in the Consolidated Plan. (list such initiatives below) Other: (list below)			
	Executive Director is a member of the City of Bath Community Development			
	Block Grant Committee. Bath Housing Authority works closely with the City of Bath in developing plans for the jurisdiction.			
3. PHA Requ	nests for support from the Consolidated Plan Agency			

Yes No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:	
4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)	

#### C. Criteria for Substantial Deviation and Significant Amendments

#### 1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

#### A. Substantial Deviation from the 5-year Plan:

Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the housing authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners.

B. Significant Amendment or Modification to the Annual Plan:

## <u>Attachment\_A\_</u> Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review				
Applicable & On Display	Supporting Document	Related Plan Component		
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans		
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans		
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans		
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs		
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources		
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies		
	Any policy governing occupancy of Police Officers in Public Housing  check here if included in the public housing  A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies		
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies		
X	Public housing rent determination policies, including the method for setting public housing flat rents  check here if included in the public housing A & O Policy	Annual Plan: Rent Determination		
X	Schedule of flat rents offered at each public housing development  check here if included in the public housing  A & O Policy	Annual Plan: Rent Determination		

List of Supporting Documents Available for Review					
Applicable Supporting Document Related Plan					
&		Component			
On Display		_			
X	Section 8 rent determination (payment standard) policies	Annual Plan: Rent			
	check here if included in Section 8 Administrative	Determination			
	Plan				
X	Public housing management and maintenance policy documents,	Annual Plan:			
	including policies for the prevention or eradication of pest	Operations and			
	infestation (including cockroach infestation)	Maintenance			
X	Results of latest binding Public Housing Assessment System Annual Pl				
	(PHAS) Assessment	Management and			
		Operations Annual Plan:			
	Follow-up Plan to Results of the PHAS Resident Satisfaction				
	Survey (if necessary)	Operations and			
		Maintenance and			
		Community Service &			
**		Self-Sufficiency			
X	Results of latest Section 8 Management Assessment System	Annual Plan:			
	(SEMAP)	Management and			
		Operations			
	Any required policies governing any Section 8 special housing	Annual Plan:			
	types	Operations and			
	check here if included in Section 8 Administrative	Maintenance			
X	Public housing grievance procedures	Annual Plan: Grievance			
	check here if included in the public housing	Procedures			
	A & O Policy				
X	Section 8 informal review and hearing procedures	Annual Plan:			
	check here if included in Section 8 Administrative Grievance Programme Grievance Grievance Programme Grievance Griev				
	Plan				
X	The HUD-approved Capital Fund/Comprehensive Grant Program	Annual Plan: Capital			
	Annual Statement (HUD 52837) for any active grant year	Needs			
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any	Annual Plan: Capital			
	active CIAP grants	Needs			
	Approved HOPE VI applications or, if more recent, approved or	Annual Plan: Capital			
	submitted HOPE VI Revitalization Plans, or any other approved	Needs			
	proposal for development of public housing				
X	Self-evaluation, Needs Assessment and Transition Plan required	Annual Plan: Capital			
	by regulations implementing §504 of the Rehabilitation Act and	Needs			
	the Americans with Disabilities Act. See, PIH 99-52 (HA).				
	Approved or submitted applications for demolition and/or	Annual Plan:			
	disposition of public housing	Demolition and			
		Disposition			
	Approved or submitted applications for designation of public	Annual Plan:			
	housing (Designated Housing Plans)	Designation of Public			
		Housing			
	Approved or submitted assessments of reasonable revitalization of	Annual Plan:			
	public housing and approved or submitted conversion plans	Conversion of Public			
	prepared pursuant to section 202 of the 1996 HUD Appropriations	Housing			
	Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937				
	uic Ob Housing Act Of 1957				

List of Supporting Documents Available for Review				
Applicable &	Supporting Document	Related Plan Component		
On Display	Approved or submitted public housing homeownership	Annual Plan:		
	programs/plans	Homeownership		
X	Policies governing any Section 8 Homeownership program	Annual Plan:		
71	(sectionof the Section 8 Administrative Plan)	Homeownership		
	Cooperation agreement between the PHA and the TANF agency	Annual Plan:		
	and between the PHA and local employment and training service	Community Service &		
	agencies	Self-Sufficiency		
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan:		
		Community Service &		
		Self-Sufficiency		
	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan:		
		Community Service &		
		Self-Sufficiency		
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other	Annual Plan:		
	resident services grant) grant program reports	Community Service &		
		Self-Sufficiency		
	The most recent Public Housing Drug Elimination Program	Annual Plan: Safety		
	(PHEDEP) semi-annual performance report	and Crime Prevention		
	PHDEP-related documentation:	Annual Plan: Safety		
	Baseline law enforcement services for public housing	and Crime Prevention		
	developments assisted under the PHDEP plan;			
	<ul> <li>Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement</li> </ul>			
	between the consortium and HUD (applicable only to			
	PHAs participating in a consortium as specified under 24			
	CFR 761.15);			
	Partnership agreements (indicating specific leveraged			
	support) with agencies/organizations providing funding,			
	services or other in-kind resources for PHDEP-funded			
	activities;			
	· Coordination with other law enforcement efforts;			
	· Written agreement(s) with local law enforcement agencies			
	(receiving any PHDEP funds); and			
	· All crime statistics and other relevant data (including Part			
	I and specified Part II crimes) that establish need for the			
	public housing sites assisted under the PHDEP Plan.			
X	Policy on Ownership of Pets in Public Housing Family	Pet Policy		
	Developments (as required by regulation at 24 CFR Part 960,			
	Subpart G)			
37	check here if included in the public housing A & O Policy	A 1.D1 A 1		
X	The results of the most recent fiscal year audit of the PHA	Annual Plan: Annual		
	conducted under section 5(h)(2) of the U.S. Housing Act of 1937	Audit		
	(42 U. S.C. 1437c(h)), the results of that audit and the PHA's			
	response to any findings Troubled PHAs: MOA/Recovery Plan	Troubled PHAs		
	Troubled PHAs: MOA/Recovery Plan  Other supporting documents (optional)	(specify as needed)		
	(list individually; use as many lines as necessary)	(specify as fleeded)		
	(not morvidually, use as many mics as necessary)	1		

## **Attachment B**

**Annual Statement/ Capital Fund Program** 

**Attachment: B** 

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: Bath Housing Authority		Grant Type and Number			Federal FY of Grant: 2003	
		Capital Fund Program Grant		3		
		Replacement Housing Factor				
	ginal Annual Statement Reserve for Disasters/ Emer					
	Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report  Total Estimated Cost Total Actual Cost					
Line	Summary by Development Account	Original	Revised	Obligated	Expended	
No.		Originai	Kevisea	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations	30,000				
3	1408 Management Improvements	30,000				
4	1410 Administration	8,000				
5	1411 Audit	8,000				
6	1415 Liquidated Damages					
7	1430 Fees and Costs	8,000				
8	1440 Site Acquisition	0,000				
9	1450 Site Improvement					
10	1460 Dwelling Structures	90,500				
11	1465.1 Dwelling Equipment— Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment	20,000				
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collateralization or Debt Service					
20	1502 Contingency					
21	Amount of Annual Grant: (sum of lines 2-20)	156,500				
22	Amount of line 21 Related to LBP Activities					
23	Amount of line 21 Related to Section 504 compliance					
24	Amount of line 21 Related to Security –Soft Costs					
25	Amount of line 21 Related to Security Hard Costs					
26	Amount of line 20 Related to Energy Conservation					
	Measures					

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Bath Housing Authority  Grant Type and Number Capital Fund Program Grant No: ME36-P019-501-03 Replacement Housing Factor Grant No:								Federal FY of Grant: 2003
Development No.	General Description of Major Work	Dev. Acct.	Quantity	Total Estimated Cost		Total Ac	ctual Cost	Status of Work
Name/HA-Wide	Categories	No.		Original	Revised	Funds	Funds	
						Obligated	Expended	
19-1	Paint Community Room	1460	1	3,000				
	Re-build chimney/ repoint	1460	4	6,000				
	Re-place bi-fold doors	1460	20	17,500				
19-2	Replace all kitchens & counters	1460	20	30,000				
	Install new bath vanities, sinks	1460	20	10,000				
	Replace faucets, kitchen & bath	1460	20	8,500				
19-4	Paint common hallways	1460	2	8,000				
	Replace medicine cabinets & lights	1460	20	7,500				
HA-Wide	Operations	1406		30,000				
	Non-dwelling equipment	1475		20,000				
	Administration	1410		8,000				
	Fees & Costs	1430		8,000				
				156 500				
				156,500				

## Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

PHA Name: Bath Housing Authority	Grant Type ar	nd Number					Federal FY of Grant: 2003	
		Program No: N Housing Factor						
Development Number Name/HA -Wide Activities	Al (Qu	l Fund Obligat arter Ending I	ted Date)	All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
HA- Wide	Sept 05			Oct 06				
19-1 Anchorage	Sept 05			Oct 06				
19-2 Moorings	Sept 05			Oct 06				
19-4 Dike's Landing	Sept 05			Oct 06				

### **Attachment: B**

Ann	ual Statement/Performance and Evalua	ation Report								
Cap	ital Fund Program and Capital Fund P	rogram Replaceme	ent Housing Factor (	CFP/CFPRHF) Pa	art 1: Summary					
	Tame: Bath Housing Authority	Grant Type and Number	Grant Type and Number							
	•	Capital Fund Program Gra								
		Replacement Housing Factor								
∐Ori ⊠na	ginal Annual Statement Reserve for Disasters/ Emer formance and Evaluation Report for Period Ending: 0	rgencies ⊠Kevised Annual	Statement (revision no: 1)							
Line	Summary by Development Account		mated Cost		Actual Cost					
No.	Summary by Development Account	Original	Revised	Obligated	Expended					
110.		Original	Reviseu	Obligateu	Expended					
1	Total non-CFP Funds									
2	1406 Operations	30,000.00	30,000.00							
3	1408 Management Improvements									
4	1410 Administration	4,000.00	4,000.00							
5	1411 Audit									
6	1415 Liquidated Damages									
7	1430 Fees and Costs	4,000.00	4,000.00							
8	1440 Site Acquisition									
9	1450 Site Improvement	5,000.00	20,000.00							
10	1460 Dwelling Structures	98,877.00	87,877.00							
11	1465.1 Dwelling Equipment— Nonexpendable	4,000.00	0							
12	1470 Non-dwelling Structures									
13	1475 Non-dwelling Equipment	3,000.00	3,000.00							
14	1485 Demolition									
15	1490 Replacement Reserve									
16	1492 Moving to Work Demonstration									
17	1495.1 Relocation Costs									
18	1499 Development Activities									
19	1501 Collateralization or Debt Service									
20	1502 Contingency									
21	Amount of Annual Grant: (sum of lines 2-20)	148,877.00	148,877.00							
22	Amount of line 21 Related to LBP Activities									
23	Amount of line 21 Related to Section 504 compliance									
24	Amount of line 21 Related to Security –Soft Costs									
25	Amount of line 21 Related to Security Hard Costs									
26	Amount of line 20 Related to Energy Conservation Measures									

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Bath		Federal FY of Grant: 2002						
Development No.	General Description of Major Work	Dev. Acct.	Quantity	Total Estimated Cost		Total Ac	ctual Cost	Status of Work
Name/HA-Wide	Categories	No.		Original	Revised	Funds	Funds	
						Obligated	Expended	
ME 19-1	Increase lighting community room	1475	1	3,000	3,000			
	Replace bi-fold closed doors	1460	20	20,500	20,500			
	Replace medicine cabinets & lights	1460	39	17,500	17,500			
ME 19-2	Replace roof	1460	1	0	49,877			Moved from 2005
	New intercom	1465.1	1	4,000	0			Moved to 2000
	Replace kitchen cabinets	1460	20	47,877	0			Moved to 2003
	Replace bathroom vanities & faucets	1460	20	13,000	0			Moved to 2003
ME 19-4	Community patio, enclosure &	1450	1	5,000	15,000			
	drainage			Í	ŕ			
	Retaining wall	1450		0	5,000			
HA-wide	Management & Operations	1406		30,000	30,000			
	Administration	1410		4,000	4,000			
	Fees & Costs	1430		4,000	4,000			
				148,877	148,877			

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

PHA Name: Bath Housing Authority	Grant Type ar	nd Number					Federal FY of Grant: 2002	
		Program No: Nousing Factor		01-02				
Development Number Name/HA -Wide Activities	All (Qua	All Fund Obligated (Quarter Ending Date)			Funds Expenarter Ending I	ded Date)	Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
HA- Wide	May 04			Dec 05				
ME 19-1 Anchorage	May 04			Dec 05				
ME 19-2 Moorings	May 04			Dec 05				
ME 19-4 Dike's Landing	May 04			Dec 05				

**Attachment: B** 

	ual Statement/Performance and Evalu	-				
Cap	ital Fund Program and Capital Fund F	Program Replacement 1	Housing Factor (CF	P/CFPRHF) Par	t 1: Summary	
	Name: Bath Housing Authority	Grant Type and Number Capital Fund Program Grant No Replacement Housing Factor Gr		Federal FY of Grant: 2001		
	ginal Annual Statement Reserve for Disasters/ Eme formance and Evaluation Report for Period Ending: 0					
Line	Summary by Development Account	Total Estimate	ed Cost	Total Ac	tual Cost	
No.		Original	Revised	Obligated Expended		
1	Total non-CFP Funds					
2	1406 Operations	25,000.00	25,000	25,000	25,000	
3	1408 Management Improvements					
4	1410 Administration	4,000.00	4,000	4,000		
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	4,000.00	4,000	2,000		
8	1440 Site Acquisition					
9	1450 Site Improvement	32,000.00	35,963	8,989	3,989	
10	1460 Dwelling Structures	70,000.00	59,650	23,050	15,885	
11	1465.1 Dwelling Equipment— Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment	23,590.00	29,977	29,977	29,977	
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collateralization or Debt Service					
20	1502 Contingency					
21	Amount of Annual Grant: (sum of lines 2-20)	158,590.00	158,590	93,016	74,851	
22	Amount of line 21 Related to LBP Activities					
23	Amount of line 21 Related to Section 504 compliance					
24	Amount of line 21 Related to Security –Soft Costs					
25	Amount of line 21 Related to Security Hard Costs					
26	Amount of line 20 Related to Energy Conservation Measures	21,500.00	17,074			

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Bath Housing Authority  Grant Type and Number  Capital Fund Program Grant No: ME36-P019-501-01  Replacement Housing Factor Grant No:								Federal FY of Grant: 2001
Development No.	General Description of Major Work	Dev. Acct.	Quantity	Total Estim	ated Cost	Total Act	Status of Work	
Name/HA-Wide	Categories	No.		Original	Revised	Funds	Funds	
						Obligated	Expended	
ME 19-1	Replace toilets w/ 1.6 gal tanks	1460	10	2,700	2,700			
	Community patio & enclosure	1450	1	6,000	3,989	3,989	3,989	done
	Add insulation & vents (postponed to 2007	1460		11,400	0			
	Seal & coat parking lot & sidewalk	1450		10,000	15,974			
ME 19-2	Paint community room and hall	1460		2,000	3,050	3,050		
	Replace outdated carpet	1460	10	12,000	12,000	Ź		
	Repair/replace concrete	1450		16,000	16,000	5,000		
	Complete elevator update	1460		20,000	20,000	20,000	15,885	90%
ME 19-4	Replace floor tile & carpet	1460	10	12,000	12,000			
	Replace kitchen & bath faucets	1460	20	4,500	4,500			
	Replace tliets with 1.6 gallon tanks	1460	20	5,400	5,400			
HA-wide	Non-dwelling equipment	1475		23,590	29,977	29,977	29,977	100%
	Operations	1406		25,000	25,000	25,000	25,000	100%
	Administration	1410		4,000	4,000	4,000		
	Fees & Costs	1430		4,000	4,000	2,000		
				158,590	158,590	93,016	74,851	
				ŕ	,	,	,	

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

PHA Name: Bath Housing Authority	Grant Type ar	nd Number					Federal FY of Grant: 2001
		Program No: N Housing Factor					
Development Number Name/HA -Wide Activities		All Fund Obligated (Quarter Ending Date)			Funds Expen arter Ending l	ded Date)	Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-wide	Jan-02			Oct-04			
ME 19-1	Mar-03			Oct-04			
Anchorage							
ME 19-2	Mar-03			Oct-04			
Moorings							
ME19-4	Mar-03			Oct-04			
Dikes Landing							

**Attachment: B** 

Ann	ual Statement/Performance and Evalu	ation Report				
Capi	ital Fund Program and Capital Fund F	Program Replacement	Housing Factor (Cl	FP/CFPRHF) Par	t 1: Summary	
PHA N	ame: Bath Housing Authority	Grant Type and Number		·	Federal FY of Grant: 2000	
		Capital Fund Program Grant N				
		Replacement Housing Factor G				
∐Ori	ginal Annual Statement Reserve for Disasters/ Eme	rgencies Kevised Annual St	atement (revision no: 3)			
	formance and Evaluation Report for Period Ending: 0			TD 4 1 4	4 10 4	
Line	Summary by Development Account	Total Estima			ctual Cost	
No.		Original	Revised	Obligated	Expended	
1	Testal and CED E and					
1	Total non-CFP Funds	25,000,00	25,000	25.000	25,000	
2	1406 Operations	25,000.00	25,000	25,000	25,000	
3	1408 Management Improvements	4 000 00	4.000	4.000	2.000	
4	1410 Administration	4,000.00	4,000	4,000	2,000	
5	1411 Audit					
6	1415 Liquidated Damages	4.000.00	4.000	4.000		
7	1430 Fees and Costs	4,000.00	4,000	4,000		
8	1440 Site Acquisition	14.000.00	26.555	24.55	0.155	
9	1450 Site Improvement	14,000.00	26,757	26,757	3,157	
10	1460 Dwelling Structures	101,112.00	91,074	91,074	58,373	
11	1465.1 Dwelling Equipment— Nonexpendable	2,850.00	2,772	2,772	2,772	
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment	4,500.00	1,859	1,859	1,859	
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collateralization or Debt Service					
20	1502 Contingency					
21	Amount of Annual Grant: (sum of lines 2-20)	155,462.00	155,462	155,462	94,161	
22	Amount of line 21 Related to LBP Activities					
23	Amount of line 21 Related to Section 504 compliance					
24	Amount of line 21 Related to Security –Soft Costs					
25	Amount of line 21 Related to Security Hard Costs					
26	Amount of line 20 Related to Energy Conservation	15,478.00				
	Measures					

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

	Housing Authority	Capital Fu	and Number nd Program ( nt Housing F		Federal FY of Grant: 2000			
Development No.	General Description of Major Work	Dev. Acct.	Quantity	Total Esti	mated Cost	Total Ac	ctual Cost	Status of Work
Name/HA-Wide	Categories	No.		Original	Revised	Funds	Funds	
						Obligated	Expended	
ME19-1	Replace toilets w/ 1.6 gallon tanks	1460	10	2,700		2,700	103	
ME19-1	Replace carpet two units	1460	2	0	1,333	1,333	1,333	done
ME19-1	Replace wood steps	1460		4,400	5,060	5,060	5,060	done
ME19-2	Repair exterior concrete walks	1450		7,500	11,557	11,557	3,157	25%
ME19-2	Replace casement windows	1460	20	49,162	48,691	48,691	48,691	done
ME19-2	Replace toilets w/ 1.6 gal	1460	35	8,000	0	0		
ME19-2	Install propane heat comm. room	1465		0	2,050	2,050	2,050	done
ME19-2	Replace carpet two units	1460	2	0	2,089	2,089	2,089	done
ME19-2	Lower pull stations to accommodate 504	1465.1	20	4,500	722	722	722	done
ME19-2	New Intercom moved from 2002	1460		0	3,068	3,068		done
ME19-4	Replace toilets (move to 2003)	1460	14	2,000	0			
ME19-4	Replace kitchen ceiling exhaust fans	1460	20	8,900	3,944	3,944		
ME19-4	Replace apt. entrance doors	1460	20	18,000	,	18,000		
ME19-4	Replace knob handles w/ lever	1460	20	3,000		3,000		
ME19-4	Replace (2) 80 gallon hot water	1475		4,500	1,859	1,859	1,859	
ME19-4	tanks Build additional drainage around	1450		8,000		15,200		
	bld							
ME19-4	Replace (6) windows, front sitting room	1460		1,800	3,189	3,189	2,097	
HA-wide	Management & Operations	1406		25,000		25,000	25,000	
HA-wide	Administration	1410		4,000		4,000	2,000	
HA-wide	Fees & costs	1430		4,000		4,000		

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

PHA Name: Bath Housing Authority	Grant Type ar	nd Number					Federal FY of Grant: 2000	
	Capital Fund Replacement	Program No: N Housing Factor						
Development Number Name/HA -Wide Activities	Al (Qu	All Fund Obligated (Quarter Ending Date)			Funds Expen arter Ending I	ded Date)	Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
HA-wide	Jan-01			Oct-03				
ME 19-1	Mar-02			Oct-03				
Anchorage								
ME 19-2	Mar-02			Oct-03				
Moorings								
ME19-4	Mar-02			Oct-03				
Dikes Landing								

**Attachment: B** 

Ann	ual Statement/Performance and Evalu	ation Report			
Cap	ital Fund Program and Capital Fund F	Program Replacement 1	Housing Factor (	(CFP/CFPRHF) Par	t 1: Summary
	Name: Bath Housing Authority	Grant Type and Number	Federal FY of Grant: 1999		
		Capital Fund Program Grant No			
		Replacement Housing Factor Gr			
	iginal Annual Statement Reserve for Disasters/ Eme				
	formance and Evaluation Report for Period Ending:				
Line	Summary by Development Account	Total Estimate			tual Cost
No.		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	19,508.00		19,508.00	19,508.00
4	1410 Administration	2,000.00		2,000.00	2,000.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	6,808.00		6,808.00	6,808.00
8	1440 Site Acquisition				
9	1450 Site Improvement	6,651.00		6,651.00	6,651.00
10	1460 Dwelling Structures	82,501.00		82,501.00	82,501.00
11	1465.1 Dwelling Equipment— Nonexpendable	1,442.00		1,442.00	1,442.00
12	1470 Non-dwelling Structures	2,408.00		2,408.00	2,408.00
13	1475 Non-dwelling Equipment	12,690.00		12,690.00	12,690.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2-20)	134,008.00		134,008.00	134,008.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security –Soft Costs				
25	Amount of line 21 Related to Security Hard Costs				
26	Amount of line 20 Related to Energy Conservation Measures	2,750.00		2,750.00	2,750.00

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Bath	Name: Bath Housing Authority  Grant Type and Number  Capital Fund Program Grant No: ME36-P019-907-99  Replacement Housing Factor Grant No:							Federal FY of Grant: 1999	
Development No.	General Description of Major Work	Dev. Acct.	Quantity	Total Esti	nated Cost	l Cost Total Actual Cost S		Status of Work	
Name/HA-Wide	Categories	No.		Original	Revised	Funds	Funds		
	-					Obligated	Expended		
ME19-1	Replace toilets w/ 1.6 gallon tanks	1460	10	2,750		2,750	2,750	100%	
ME19-1	Replace five stoves	1466.1	5	1,350	1,442	1,442	1,442	100%	
ME19-1	Install electric strike release	1460		11,500	2,876	2,876	2,876	100%	
ME19-1	Install GFCI in kitchen	1460		4,000	1,555	1,555	1,555	100%	
ME19-1	Install storm drain system at east elev.	1450		1,900	2,181	2,181	2,181	100%	
ME19-2	Widen fire road behind building	1450		4,500	4,470	4,470	4,470	100%	
ME19-2	Replace casement windows	1460	20	31,500	45,573	45,573	45,573	100%	
ME19-2	Sprinkler maintenance shop	1470		2,500	2,408	2,408	2,408	100%	
ME19-2	Install GFCI kitchen	1460	40	12,000	1,820	1,820	1,820	100%	
ME19-2	Handicap adaptations for elevator	1475		7,000	12,690	12,690	12,690	100%	
ME19-2	New Shelves community room	1460		1,500	1,075	1,075	1,075	100%	
ME19-4	GFCI outlet in kitchen	1460	20	6,000	0	0	0		
ME19-4	Replace corridor lights	1460	0	0	1,071	1,071	1,071	100%	
ME19-4	Replace toilets with 1.6 gal (move to 2000)	1460		2,600	0				
ME19-4	Install heat detectors (move to 2001)	1460		5,400	0				
ME19-4	Replace outside stairway (moved from 97 CIAP)	1460	0	25,781	25,781	25,781	25,781	100%	
HA-wide	Management & Operations	1408		34,508	19,508	19,508	19,508	100%	
HA-wide	Administration	1410		2,000		2,000	2,000	100%	
HA-wide	Fees & Costs	1430		3,000	6,808	6,808	6,808	100%	

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

<b>PHA Name:</b> Bath Housing Authority	Grant Type ar	nd Number					Federal FY of Grant: 1999
		Program No: N Housing Factor					
Development Number Name/HA -Wide Activities	(Qu	l Fund Obligat arter Ending I	ted Date)	All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
***	g . 01			g 02			
HA-wide	Sept-01			Sept-02			
ME 19-1	Sept-01			Sept-02			
Anchorage							
ME 19-2	Sept-01			Sept-02			
Moorings	1			•			
ME19-4	Sept-01			Sept-02			
Dikes Landing	1			•			

Attachment: C

Capital Fund Program Fi	ve-Year A	ction Plan			
Part I: Summary					
PHA Name: Bath Housing Authority				☐Original 5-Year Plan ☐Revision No: 3	
Development Number / Name HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2004 PHA FY: 04	Work Statement for Year 3 FFY Grant: 2005 PHA FY: 05	Work Statement for Year 4 FFY Grant: 2006 PHA FY: 06	Work Statement for Year 5 FFY Grant: 2007 PHA FY: 07
10.1 A1	See	26.500	57.500	55,000	45,000
19-1 Anchorage	Annual Statement	36,500	57,500	55,000	45,000
19-2 Moorings	Statement	40,000	47,000	19,500	55,000
19-4 Dike's Landing		43,000	16,000	42,000	20,000
HA-Wide		38,000	38,000	38,000	38,000
Total of CFP Funds by Year		157,500	158,500	154,500	158,000
Replacement Housing Factor Funds					

_	•	ive-Year Action Plan						
Activities For Year	Supporting Pages	S—Work Activities  Activities for Year: 2  FFY Grant: 2004  PHA FY: 04	Activities for Year: 3 FFY Grant: 2005 PHA FY: 05					
One	Development Name/Number	Major Work Categories	<b>Estimated Cost</b>	Development Name/Number	Major Work Categories	<b>Estimated Cost</b>		
See								
Annual								
Statement	19-1 Anchorage	Closet Doors (78 Doors)	27,000	19-1 Anchorage	Replace siding two blds	35,000		
		Replace bathroom fans	9,500		Replace skylights 19 unit	22,500		
	19-2 Moorings	Replace kitchens 20 unit	30,000	19-2 Moorings	Resurface all parking	35,000		
	J	Install new operable windows front hall	10,000	J	Replace hallway carpet	12,000		
	19-4 Dike's Landing	Replace windows	35,000	19-4 Dike's Landing	Replace hall lights	8,000		
	1)-4 Dike s Landing	Replace sub-floor & carpet 3 units	8,000	17-4 Dike 3 Landing	Replace sub-floor & carpet 3 units	8,000		
	HA-wide	Operations	30,000	HA-Wide	Operations	30,000		
		Admin, prep, etc. RFP	4,000		Admin, prep, etc. RFP	4,000		
		Arch/ Eng	4,000		Arch/ Eng	4,000		
			157,500			158,500		
Total CFP	Estimated Cost				316,000			

Capital Fund Program Five-Year Action Plan	l
Part II: Supporting Pages—Work Activities	

	Activities for Year: 4 FFY Grant: 2006 PHA FY: 06		Activities for Year: <u>5</u> FFY Grant: 2007 PHA FY: 07					
Development Name/Number	Major Work Categories	<b>Estimated Cost</b>	Development Name/Number	Major Work Categories	<b>Estimated Cost</b>			
19-1 Anchorage	Add roofs over ent. dors	20,000	19-1 Anchorage	Resurface parking lots	20,000			
•	Repair/replace siding 2 bld	35,000		Replace vinyl 20 units	20,000			
				Add insulation & vents	5,000			
19-2 Moorings	Replace stove exhaust	10,000	19-2 Moorings	Repair/ Replace siding	55,000			
	Install roofs ext. doors	4,500						
	New comm room kitchen	5,000						
19-4 Dike's Landing	Replace closet doors	29,000	19-4 Dike's Landing	Repair/seal parking & walks	20,000			
	Replace dumpster cover	5,000						
	Replace sub-floor & carpet 3 units	8,000						
HA-wide	Operations	30,000	HA-Wide	Operations	30,000			
	Admin, prep, etc. RFP	4,000		Admin, prep, etc. RFP	4,000			
	Arch/ Eng	4,000		Arch/ Eng	4,000			
		154,500			158,000			
Total CFP Estimated Co	ost		312,500					

## **PHA Public Housing Drug Elimination Program Plan**

Not Appl	icable			
	HIS PHDEP Plan template (HUD 50			
accordan	ce with Instructions located in appl	icable PIH Notices	•	
a				
	1: General Information/History			
	ount of PHDEP Grant \$			
_	bility type (Indicate with an "x")	N1	N2	
C. FFY	in which funding is requested _			
D. Exec	cutive Summary of Annual PHD	EP Plan		
	e below, provide a brief overview of the I			
	ndertaken. It may include a description of five (5) sentences long	the expected outcome	es. The summary must not b	e
more man	rive (3) sentences long			
E. Targ	et Areas			
	he following table by indicating each PHI	DEP Target Area (dev	elopment or site where activ	ities
	ducted), the total number of units in each			
	expected to participate in PHDEP sponso		Target Area. Unit count	
information	n should be consistent with that available	in PIC.		
DIIDED T		T-4-1# - PII		4.
	arget Areas levelopment(s) or site)	Total # of Unit	_	
(1 table of t	development(s) of site)	Area(s		
		12100(8	Area(s)	8
	ition of Program			
this Plan (p	e duration (number of months funds will blace an "x" to indicate the length of progr			
months).				
	12 Months 10 N/	4ha 24 N.T	antha	
	12 Months 18 Mon	uns 24 M	onuns	
	EP Program History			

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs <u>have not</u> been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995						
FY 1996						
FY 1997						
FY1998						
FY 1999						

### **Section 2: PHDEP Plan Goals and Budget**

### A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

### **B.** PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY PHDEP Budget Summary							
Original statement							
Revised statement dated:	<u> </u>						
Budget Line Item	Total Funding						
9110 – Reimbursement of Law Enforcement							
9115 - Special Initiative							
9116 - Gun Buyback TA Match							
9120 - Security Personnel							
9130 - Employment of Investigators							
9140 - Voluntary Tenant Patrol							
9150 - Physical Improvements							
9160 - Drug Prevention							
9170 - Drug Intervention							
9180 - Drug Treatment							
9190 - Other Program Costs							
TOTAL PHDEP FUNDING							

### C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of	Target	Start	Expected	PHEDE	Other Funding	Performance Indicators
	Persons	Population	Date	Complete	P	(Amount/	
	Served			Date	Funding	Source)	
1.							
2.							
3.							

9115 - Special Initiative				Total PHDEP Funding: \$			
Goal(s)							
Objectives							
Proposed Activities	# of Persons	Target Population	Start Date	Expected Complete	PHEDEP Funding	Other Funding (Amount/	Performance Indicators
	Served	Topulation	Date	Date	Tunung	Source)	
1.							
2.							
3.							

9116 - Gun Buyback TA Match					Total PHDEP Funding: \$			
Goal(s)					,			
Objectives								
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators	
1.								
2.								
3.								

9120 - Security Personnel			Total PHDEP Funding: \$				
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9130 – Employment of Inv			Total PHDEP Funding: \$				
Goal(s)					<u> </u>		
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9140 – Voluntary Tenant Pa		Total PHDEP Funding: \$					
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvement			Total PHDEP Funding: \$				
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9160 - Drug Prevention			Total PHDEP Funding: \$				
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9170 - Drug Intervention		Total PHDEP Funding: \$					
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9180 - Drug Treatment				Total PHDEP Funding: \$			
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9190 - Other Program Costs		Total PHDEP Funds: \$					
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

# **Required Attachment D: Resident Member on the PHA Governing Board**

1.	<del></del>	Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)								
A.	Name of resident member(s) on the governing board:									
	Gloria Horridge Robert Peabody									
В.	. How was the resident board member selected: (select one)?  ☐ Elected ☐ Appointed									
C.	The term of appointment is (include the date term expires): February 2, 2003									
2.	assisted by the PI the go the rea	ning board does not have at least one member who is directly HA, why not?  e PHA is located in a State that requires the members of a overning board to be salaried and serve on a full time basis to e PHA has less than 300 public housing units, has provided asonable notice to the resident advisory board of the opportunity serve on the governing board, and has not been notified by any sident of their interest to participate in the Board. ther (explain):								
В.	Date of next term ex	spiration of a governing board member:								
C.	Name and title of appointing official(s) for governing board (indicate appointing official for the next position):									
	City of Bath, City Council									

# Required Attachment E: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Bertha Peabody
Marion Thompson
Betty Kraemer
Demorise Swain
Florence Seigers
Janet Ring
Mary Dranchek
William Russell
Eleanor Collins
Joan Vanderlaan
Shirley Seekins
Pat LaVan

Leona Hill Betty Kelley Ron Marston

Muriel Winchenbach

#### ATTACHMENT F: Comments of Resident Advisory Board

Notification that the Agency Plan was available for review was distributed to all residents in the form of the monthly newsletter. A notice was posted at the Administrative Office. Additionally, a publicly advertised meeting was held at the Bath Housing Authority office at 80 Congress Avenue, Bath, Maine 04530 on October 16, 2002 at 6:30 p.m.

There were no comments as a result of the plan being available for review by residents. Additionally, we did not have any attendance at the publicly advertised meeting.

We scheduled three meetings with residents at the various sites, October 7, 10 and 15<sup>th</sup>. The Agency Plan was distributed to all members of the RAB.

Comments from all RAB members was very positive. They agreed with the prioritization of the capital fund items. We received several requests for design modifications of items already included in the plan. For example, residents at Moorings wanted to have higher kitchen faucets installed as part of their kitchen renovations. BHA response was to note the request for consideration when the kitchen project is designed. We received written comments from a tenant at Dike's Landing but the items requested are not capital fund items and will be addressed with routine maintenance.

Anchorage tenants wanted to make sure that when their community room was painted which is already in the Five Year Plan that it include the laundry room. They were informed that the laundry room is considered part of the community space and will be included in the painting contract when that item is done.

#### ATTACHMENT G: STATEMENT OF EFFORTS TO ACHIEVE GOALS

GOAL: Expand the Supply of Assisted Housing

- When available, will apply for new Section 8 units

GOAL: Improve Quality of Assisted Housing

- Closed out 1999 CIAP improvements. Have 100% obligation of 2000
   CFP funds. Have begun Capital Fund 2001 and 2002 improvements.
   Anticipate obligation and expenditure on a timely basis.
- provided staff with additional training for Inspection Protocols

GOAL: Increase assisted housing choices

- Provided homeownership counseling for Section 8 participants
- Continued to work to implement Section 8 Homeownership Program
- Continue collaboration with local non-profits to provide homeownership opportunities for assisted families.

GOAL: Provide Improved Living Environment

- Continued efforts to maintain Nursing/Wellness Program through independent grants. Applied for ROSS funding.

GOAL: Promote self-sufficiency and asset development of assisted households

- All buildings elderly self-sufficiency handled through Nursing/Wellness Program. Section 8 continue to do interim recertifications only at family request if their income goes down or at change of unit.
- Continue to work to implement Sec. 8 Homeownership

GOAL: Ensure Equal Opportunity in Housing for all Americans

- Conduct operations of housing authority in conformance with Affirmative Marketing Plan.
- Work collaboratively with local area agencies to ensure access to housing for persons with disabilities.